### DECLARATION AND POWER OF ATTORNEY AND PETITION FOR UNITED STATES PATENT APPLICATION

As the below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

#### COMBINATION DRUG THERAPY FOR GLYCOLIPID STORAGE DISEASES

The spec	ification of v	which (check one)		
[X] is	s attached her	reto		
□ w <sub>i</sub>	as filed on _			
as Applicable	cation Serial le).	No and was ame	nded on	(if
the above	nereby state to e identified s t referred to	hat I have reviewed an pecification, includin above.	d understand g the claims	the contents of , as amended by any
the exami	acknowledge th ination of thi Regulations, §	e duty to disclose info s application in accord 1.56(a).	ormation which dance with T	ch is material to itle 37, Code of
States Co certifica applicati	ode, § 119 of ite listed bel on for patent	oreign priority benefit any foreign application ow and have also ident or inventor's certific lication on which prior	n(8) for pate ified below a cate having a	ent or inventor's any foreign a filing date
		PRIOR FOREIGN APPLICA	TION(S)	
				ority imed
(Number)	(Country)	(Day/month/year fi	iled) Yes	No.
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(Number)	(Country)	(Day/month/year fi	iled) Yes	No
		·		
(Number)	(Country)	(Day/month/year fi	iled) Yes	ио

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

60/145,568

July 26, 1999

Pending

(Application Serial No.) (Filing date) (Status) (patented, pending, abandoned)

(Application Serial No.) (Filing date) (Status) (patented, pending, abandoned)

POWER OF ATTORNEY: As a named inventor, I hereby appoint as attorneys agents: DENNIS A. BENNETT, Reg. No. 34547, JOSEPH W. BULOCK, Reg. No. P37103, J. TIMOTHY KEANE, Reg. No. 27808, CYNTHIA S. KOVACEVIC, Registration No. 35578, SCOTT J. MEYER, Registration No. 25275, JOY ANN SERAUSKAS, Registration No. 27952, and ROGER A. WILLIAMS, Registration No. 27679, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Direct all telephone calls to SCOTT J. MEYER at (314) 694-3117 and address all correspondence to:

G. D. Searle & Co.
Corporate Patent Law Department
P.O. Box 5110
Chicago, IL 60680-5110
Attn: Roger A. Williams

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

WHEREFORE, I PRAY that Letters Patent be granted to me solely or jointly with the additional inventor(s) (if any) named below for the invention described and claimed in the above-identified specification and claims, and I hereby subscribe my name to the above-identified specification and claims, Declaration, Power of Attorney and this Petition.



FIRST JOINT INVENTOR,

1-00

FULL NAME (INVENTOR)	LAST JACOB	FIRST	MIDDLE
RESIDENCE & CITIZENSHIP	CITY	STATE/FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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SIGNATURE OF INVEN	TOR:
	0/2
	<u> </u>

DATE: July 17, 2000

SECOND JOINT INVENTOR,

FULL NAME (INVENTOR)	LAST	FIRST RAYMOND	MIDDLE A.
RESIDENCE & CITIZENSHIP	CITY Oxford	STATE/FOREIGN COUNTRY England	COUNTRY OF CITIZENSHIP U.K.
POST OFFICE ADDRESS	Glycobiology Institute, Department of Biochemistry University of Oxford South Parks Road	CITY Oxford OX1 3QU	STATE/COUNTRY England U.K.

SIGNATURE OF INVENTOR:	•
	DATE:

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The specification of which (check one)	
is attached hereto	
as Application Serial No and was amended on applicable).	(if
I hereby state that I have reviewed and unders the above identified specification, including the cl amendment referred to above.	tand the contents of aims, as amended by an
I acknowledge the duty to disclose information the examination of this application in accordance wi Federal Regulations, § 1.56(a).	which is material to th Title 37, Code of
I hereby claim foreign priority benefits under States Code, \$ 119 of any foreign application(s) for certificate listed below and have also identified be application for patent or inventor's certificate hav before that of the application on which priority is	low any foreign ing a filing date
PRIOR FOREIGN APPLICATION(S)	Priority Claimed
(Number) (Country) (Day/month/year filed)	Yes No
(Number) (Country) (Day/month/year filed)	Yes No
(Number) (Country) (Day/month/year filed)	Yes No

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FIRST JOINT INVENTOR,

FULL NAME (INVENTOR)	LAST	FIRST	MIDDLE
	JACOB	GARY	s
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SIGNATURE OF	INVENTOR:		
		DATE:	

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SIGNATURE OF INVENTOR:

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DATE: 19th of July 2000